

Mid-America Alliance

Dr. Richard Raymond

Chief Medical Officer

Nebraska Health and Human Services
System

www.hhs.state.ne.us



IT'S TIME AGAIN FOR
EVERYONE'S LEAST FAVORITE
GAME... FEAR OF THE WEEK!

TODAY, WE WELCOME JOHN
SMIDDLES DORF, A DAIRY FARMER
FROM WISCONSIN... JOHN,
GIVE 'ER A SPIN!!



What the Mid-America Alliance is not:

Emergency Management
Assistance Compact



Emergency Management Assistance Compact

...provide for mutual assistance between the states in “managing any emergency or disaster that is *duly declared by the governor of the affected states*, whether arising from natural disaster, technological hazard, manmade disaster, civil emergency aspects of resources shortages, community disorders, insurgency or enemy attack.”



EMAC

- Responsibility for planning
- Exercises and training
- Licenses and permits
- Liability
- Compensation (Including death benefits)
- Planning for evacuation



What the Mid-America Alliance is:

- Purpose
 - Provide a framework for mutual assistance between states during a public health emergency that does not initiate a governor declaration of emergency
 - Augment EMAC regionally

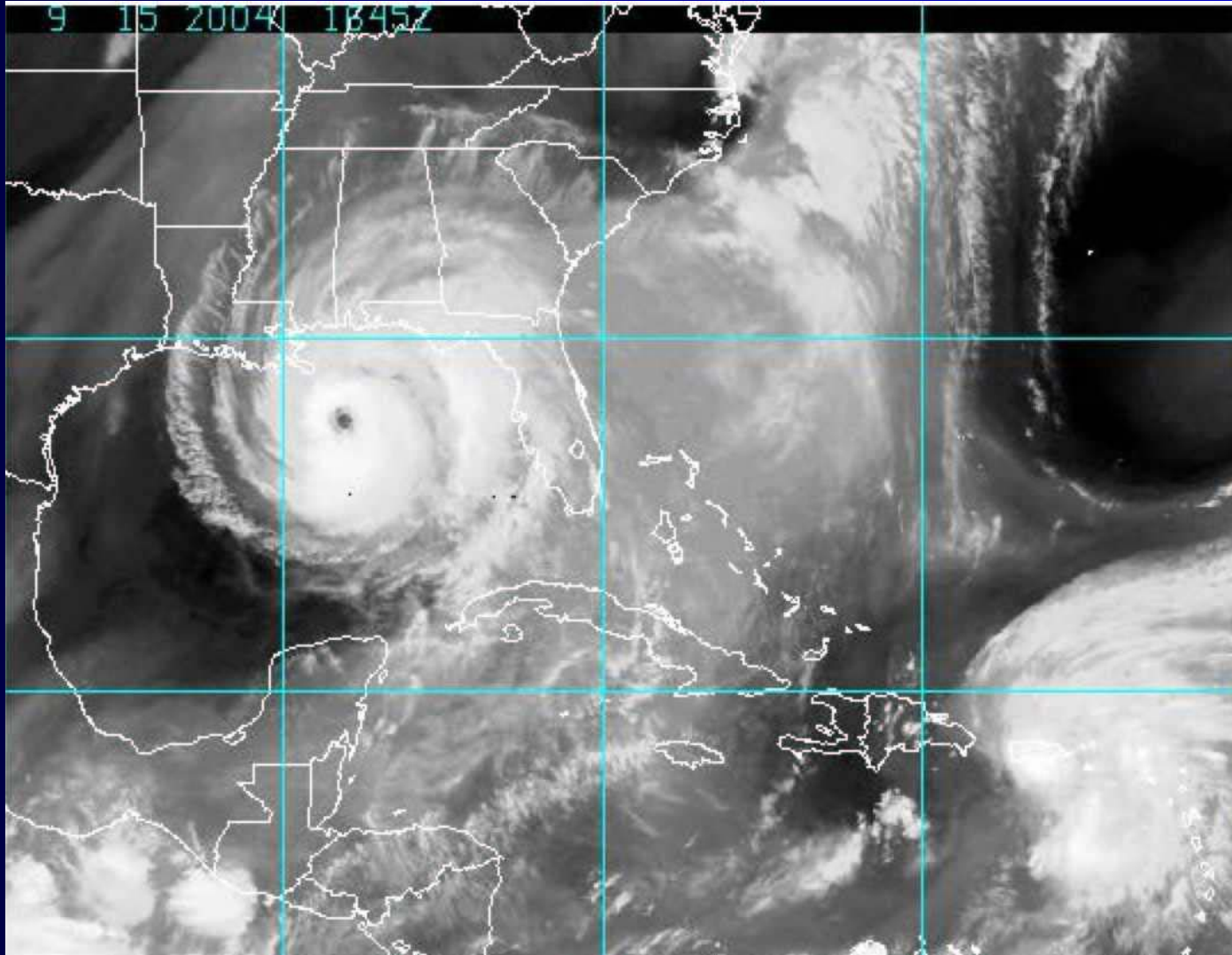


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- Need
 - Protocols and mechanisms for responding to a public health emergency not meeting the governor-declared emergency threshold do not exist.
 - Rapid assistance requires pre-event planning
 - No one state has capability to address all potential scenarios
 - In multi-state mass casualty event, Fed government will be fully occupied



Events simultaneous with emergencies that occupy federal resources



We need to develop regional cooperative programs for mutual aid and support.

Most PH staff are already quite busy with their important daily work.

Emergencies, even small ones, put daily work on hold. Mutual aid allows that work to resume more quickly

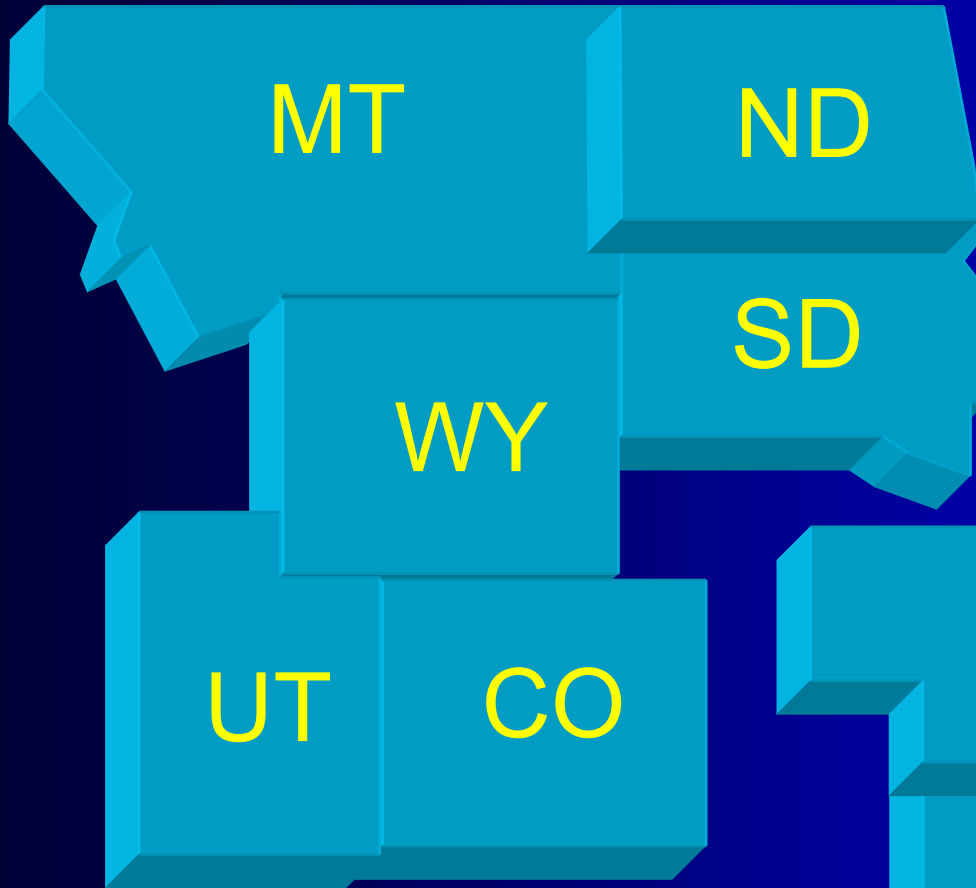


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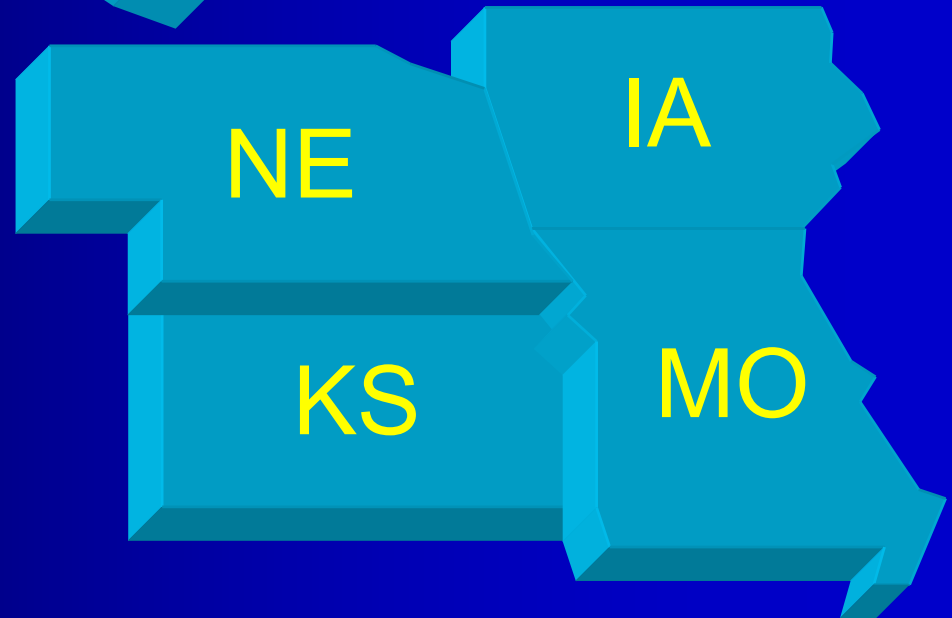
- Examples
- Laboratory
 - New episode of anthrax in regional US mail
 - West Nile virus in adjacent states
- Epidemiology
 - Anhydrous ammonia spill
 - Outbreak of vaccine preventable disease in rural area
- Cross border events (metropolitan areas)



Region VIII



Region VII



Mid-America Alliance

- Acknowledgements
 - State Health Officials from Colorado, Iowa, Kansas, Montana, Missouri, Nebraska, North Dakota, South Dakota, Utah, Wyoming
 - HHSS Regional Administrators
 - Joann Schaefer, Sharon Medcalf
 - Public Health Leadership training program project 2003
 - Joe Henderson,
 - Director OTPR, 2003
 - Steve Hinrichs, MD, NPHL



Four projects

Identify and negotiate sharing of assets and resources

Laboratory surge capacity and connectivity

Epidemiology workforce planning, common reportable diseases

Model medical license endorsement act

Advisory board

Administrative support

Data base, directory



Examples of State Assets That Can Be Shared

- Personnel
- Epidemiology staff
- Laboratory staff and equipment
- Equipment and supplies
- Mobile response units
- Translator services



Examples of potential shared resources

- Colorado: Medical Assistance team
- South Dakota: Mobile lab
- Nebraska: Hospital biocontainment unit
- Utah: Mobile autopsy unit
- Utah: Translation services
- North Dakota: Mobile communication system
- Montana: Mobile command center
- Kansas: Readiness indicators
- Iowa: Mobile showers and kitchen



Mutual Assistance Program

- Determine mechanism for activation of plan, State Health Official
- Mechanism to exchange public health personnel across state boundaries
- Establish interstate dialogue between epidemiologists and laboratorians
- Inventory and prenegotiate loan of resources



Proposed early activities of Mid-America Alliance

- Model legislation for state licensure endorsement
- Information technology development and data exchange
- Surge capacity for epi and lab services
- Strategy development for achieving readiness
- Needs and resources identification
- Testing public health readiness indicators



Objectives

- 1 Develop regional cooperative programs for mutual aid and support to respond to public health events.
- 2 Establish a state-based pilot program for testing public health readiness indicators.



Objective One

- Develop regional model for establishing mutual assistance programs
- Provide Laboratory technical assistance, epidemiology services
- Create regional database of human resources
- Establish model legislation to allow exchange of health professionals



To amend the Public Health Service Act to establish a scholarship and loan repayment program for public health preparedness workforce development to eliminate critical public health preparedness workforce shortages in Federal, State, and local public health agencies.

IN THE SENATE OF THE UNITED STATES

JULY 7, 2004

Mr. HAGEL (for himself and Mr. DURBIN) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

BILL

To amend the Public Health Service Act to establish a scholarship and loan repayment program for public health preparedness workforce development to eliminate critical public health preparedness workforce shortages in Federal, State, and local public health agencies.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Public Health Pre-
5 paredness Workforce Development Act of 2004”.

6 **SEC. 2. FINDINGS.**

7 Congress makes the following findings:



Objective Two

- Establish a state-based pilot program for testing public health readiness indicators.



Objective Two: operational plan

- Define a regional all-hazards response system with escalating capability
- Evaluate options for prototype
- Identify obstacles and solutions
- Conduct an analysis of capability
- Document staffing needs



Conceptual framework process for implementation

- Approval by all state health officers
- Involvement of key leaders from Focus Areas, epidemiologists, lab directors
- Flexibility for participation in all or selected components by states
- Advisory committee
- Administrative and legal support



Advisory Committee Membership

- State health officer or their designee
- Federal representatives of Regions VII and VIII
- Representation from each program focus group



Mutual assistance program director

- Approved by the Advisory Committee
- Job duties:
 - oversee development of mutual aid programs
 - identify new funding sources
 - serve as point of contact
 - coordinate field activities
 - direct Center staff



Roles for Center During Initialization

- Creation of template agreements
- Identification of qualified legal advice
- Assistance in obtaining buy-in
- Administrative support



Continuing Center Activities

- Coordinating program activities
- Sponsoring organizational meetings
- Contracting with schools of public health and professional groups
- Employ project facilitators
- Provide training and consultation



Measures of Success

- Participation of more than 80% of SHO
- Participation of 75% of intra-state health jurisdictions
- Adoption of legislation by majority for exchange of personnel
- Approval of epi and lab support agreements among 50% of states or approval of mutual aid plans



Current focus

- Meetings being arranged:
 - Advisory Committee in Denver
 - Public Health Law Advisors - consultant hired
 - Lab Director
- Director position posted and being recruited



**Emphasize coordinated activity
within the highest levels of state
government**

**Include private sector, academic
community, medical schools,
poison control centers, food safety
programs, Veterinary Schools and
laboratories.**



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